## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

<u>11/09/10</u>	Address:	
<u>24F32062</u>		CR 9 south of 180/90
<u>Elkhart</u>		Elkhart, IN
poratory <u>Scizure</u> (check one) nal Lab l/Glassware/Equipment (only) e (only)	Seizure Location (c Residence Outbuilding Vehicle	heck all that apply)  Ilotel/Motel Open - No Structure Other:
d: Location (bedroom, kitchen, open ain tapply) Ammonia Reaction(s): open air sphorous/Jodine Reaction(s):  ble Solvents: open air cactive Metal (Lithium): open air us Ammonia:  foric Acid Gas Generator(s):  e Acid: open air cactive mand location):  cm and location):	r, etc)	
	Investigative Information  Ephodrinc/Pseudoephedrine Tracking Log  Retail/Merchant Tip  Other: Trash lab	
		<u>523-2<b>28</b>3</u>
	24F32062 Elkhart  coratory Scizure (check one)  nal Lab  /Glassware/Equipment (only)  e (only)  d: Location (bedroom, kitchen, open air tapply)  Ammonia Reaction(s): open air cphorous/Iodine Reaction(s):  fc Solvents: open air active Metal (Lithium); open air active Metal (Lithium); open air active Acid Gas Generator(s):  e Acid; open air e Base: em and location):  age 18 discovered (check one)	Elkhart  coratory Scizure (check one)  mal Lab

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing,

<sup>\*\*\*</sup> This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.